Treasurer's Name: Matthew Doyle

2014 NOV 24 AM 9: 27

•	CORPORATE A 1991 A 1991
Committee Name:	FEC MAIL GENTER
Innovative Crusaders of Truth	
If registered, FEC ID:	
Today's Date:	
11/12/2014	
and the second of the second o	•
Federal Election Commission	
999 E Street, N.W.	•
Washington, D.C. 20463	
Re: Form 1, Statement of Organization—Unlimited	Contributions
To Whom It May Concern:	
This committee intends to make independent expen	ditures, and consistent with
the U.S. Court of Appeals for the District of Colum	
· · · · · · · · · · · · · · · · · · ·	
SpeechNow v. FEC, it therefore intends to raise fun	
committee will not use those funds to make contrib	utions, whether direct, in-kind,
or via coordinated communications, to federal cand	idates or committees.
Respectfully submitted,	

, Treasurer

1403 - 134 - 1280

FEC FORM 1

STATEMENT OF **ORGANIZATION**

7 OTTIVI 1				29	MINOV 24 AM 9: 2	<u>'</u> !
NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typing, to over the lines.	ype 12FE4M	SEC MAIL CENTE	R
Innovat	ive Civ	-inslaidelyi	si joit Tirint	th		
	<u> </u>	<u> </u>		1 1 1 1 1 1		
ADDRESS (number a	nd street) 37	-1010 N1018	thwood Di	ijve #12	1111111	
(Check if a	address . LL			 		
·	<u>[</u> G	CITY A		I CA STATE ▲	ZIP CODE A	
COMMITTEE'S E-MA	AIL ADDRESS				•	
☐ ◀ (Check if a	address d	o,y,e,e,5,@g,	mail, Com			
	Opti	onal Second E-Mail A	Address VRICICIUS AIDIE	2, 1,5@g, 1,0,1	ups facebo	in K, com
COMMITTEE'S WEE (Check if is change)	address d)	mulfacieb	0,0, 5,0,0,79,0	7.4.18/1.10.10.10	ovativec.	<u> </u>
2. DATE	1 2	2014				
3. FEC IDENTIFIC	CATION NUMBE	R ▶ C				
4. IS THIS STATE	MENT X	NEW (N) OR	AMENDE	D (A)		
I certify that I have	examined this Sta	tement and to the bo	est of my knowledge and	belief it is true, corre	ct and complete.	
Type or Print Name	of Treasurer	Matthew	Doyle			
Signature of Treasure	er <u>Mal</u>	ther D	05/	Date	Ĭ ĺ Ž ĺ Ž Ó	14
NOTE: Submission of			on may subject the person ATION SHOULD BE REPO	- •	•	. §437g.
Office Use Only			For further information (Federal Election of Toll Free 800-424 Local 202-694-110	Commission -9530	FEC FORM 1 (Revised 06/2012)	

	FEC FO	rm 1 (Hevised 02/2009) Page 2
		OMMITTEE
Car	ndidate	e Committee:
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
Nam Can	ne of didate	· - 1
	,	
	didate y Affiliati	Second bound bound Come David Second
(c)	П	District This committee supports/opposes only one candidate, and is NOT an authorized committee.
Nam	ne of	
Can	didate	
Par	ty Con	nmittee:
(d)		(National, State (Democratic, 'This committee is a or subordinate) committee of the Republican, etc.) Party.
Pol	itical A	action Committee (PAC):
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a
		Corporation Corporation w/o Capital Stock Labor Organization
		Membership Organization Trade Association Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee (i.e., nonconnected committee)
		In addition, this committee is a Lobbyist/Registrant PAC.
•		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Join	, nt Func	draising Representative:
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political
	i i i i i i i i i i i i i i i i i i i	committees/organizations, none of which is an authorized committee of a federal candidate.
	Com	mittees Participating in Joint Fundraiser
	1.	FEC ID number C
	2.	FEC ID number
	3:	
	4.	FEC ID number

FEC Form 1 (Revised 02/2009)	Page 3
Write or Type Committee Name	,
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Repr	esentative, or Leadership PAC Sponsor
Mailing Address	
	1 . 1 . 1
CITY	STATE ZIP CODE
Relationship: Connected Organization Affiliated Committee Joint Fundraising	Representative Leadership PAC Sponsor
 Custodian of Records: Identify by name, address (phone number optional) and position books and records. 	on of the person in possession of committee
Full Name Matthiew Dioyle	
Mailing Address 3200 Northwood Drive	2. #121111111111111111111111111111111111
Concord	CA 94520-
Title or Position CITY	STATE ZIP CODE
Piresijdeintilitieasiniveri	ober 925-3011-0914
8. Treasurer: List the name and address (phone number optional) of the treasurer of the any designated agent (e.g., assistant treasurer).	committee; and the name and address of
Full Name of Treasurer Maitithe Wildowile	
Mailing Address	
CITY	
Title or Position Piresi Pent LiT, Viena Siulvieri Telephone num	ber 8,25]-[3,0,1]-[0,9,1,4]

CITY

STATE

ZIP CODE

Page 4

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent

Methray Daje Fresenius Medical Care North America 4040 Nelson Avenue, Concord, CA 94520

BINCH JOIN PRINT

Federal Election Commission

999 E Steet, N.W. Washington, D.C. 20463

000000

(8/2013)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Postmarked USPS First Class Mail Postmarked (R/C) USPS Registered/Certified Postmarked **USPS** Priority Mail Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): **PREPARER** DATE PREPARED